

Clare's Law Application Form

If you are concerned about intimate partner violence from a current or former intimate or romantic partner, Manitoba's Clare's Law Program can provide you with important information to help keep you, your children, and your loved ones safe, including:

- How to recognize signs of violence
- Safety planning
- Resources in your area

CAUTION: this guide contains sensitive information related to intimate partner violence that may be distressing or activating for some readers.

If you are in immediate danger, call 911 or contact the police immediately.

If you are not in immediate danger, but would like help understanding your options or planning next steps, you can contact the following resources:

- Gender-Based Violence Crisis Line (open 24 hours) at 1-877-977-0007
- [Manitoba Justice Victim Services](#) between 8:30am and 4:30pm at 204-945-6851 or toll free at 1-866-484-2846
- Any of the community-based agencies listed at www.gov.mb.ca/familylaw/safety

How Clare's Law works in Manitoba

Step 1: Clare's Law Program

Person at Risk (or representative) completes application form.

- Clare's Law team receives and assesses application.

Clare's Law team safely connects with the Person at Risk (or representative)

- Safety planning and referrals to relevant supports
- Option to request a Clare's Law disclosure to potentially receive information about their current or former intimate partner

Step 2 (optional): Clare's Law Disclosure

If the Person at Risk (or representative) chooses to pursue a Clare's Law disclosure:

- Application is shared with police service in relevant Manitoba location, risk assessment is completed, and disclosure information is prepared.
- Applicant will receive a verbal disclosure of information.

Please note: Disclosure is determined on a case-by-case basis and not guaranteed. More information on Clare's Law can be found on the Manitoba Clare's Law website at <https://www.gov.mb.ca/familylaw/safety/claress-law.html>

Need help completing this application?

- Call 431-335-1959 (Winnipeg) to speak with a Clare's Law Team Member.

Keeping Children Safe: The safety of children is a priority.

If the Clare's Law team believes a child is at risk of harm, they are legally required to report this information to a Child and Family Services agency.

By email

Email address: _____

work personal

Through a safe third party: _____

Note: This could be a friend, family member, support worker, etc. who is able and willing to safely get information about the Clare's Law Program to you. Please inform this person that we will be contacting them.

Is it safe for us to leave the third party a voicemail? Yes No

Preferred phone number: _____ work home cell

Alternate phone number: _____ work home cell

Email address: _____ work personal

Preferred language for contact:

English

French

Other, please specify: _____

Is there anything we should be aware of when contacting you? For example, do you need a language interpreter? Provide details:

****If you are applying on behalf of yourself, go to Section 4****

5. Relationship Information

Please tell us about your relationship with the Person of Disclosure.

Note: an intimate/romantic relationship is a close romantic relationship between two people, no matter their gender. This includes married couples, common-law partners, people who are dating, or people who have a child together. You don't have to live together to be in this kind of relationship.

Are you applying about a current or past relationship?

- Current
- Past
- I don't know

Does the Person at Risk currently live with the Person of Disclosure?

- Yes
- No
- I don't know

Is there anything else you'd like us to know about the relationship?

- Religious or Cultural Considerations:

- Other:

6. What Are Your Concerns

Please tell us about any safety concerns you may have. You may select more than one box.

Note: Violence includes any conduct that is violent, threatening, or that is a pattern of coercive and controlling behaviour or causes a person to fear for their safety. Some examples of violence can include: physical, emotional, verbal, financial, and coercive control. In the case of a child, "violence" includes direct or indirect exposure to such conduct.

Has the Person of Disclosure ever caused you to be concerned for your safety or wellbeing, or the safety or wellbeing of another?

- Yes, concerned for my own safety/wellbeing
(Representative: check this box if the Person of Disclosure has caused you to be concerned for the safety of the Person at Risk)

- Yes, concerned for the safety/wellbeing of someone else
(Representative: check this box if the Person of Disclosure has caused you to be concerned for the safety of someone other than the Person at Risk)
- No
- I don't know

What safety concerns do you have?

Note: You may be asked to provide further information about this during the intake interview.

7. Privacy Notice

This section explains why we need to collect the personal information you've shared with us.

Our legal authority to collect your information

Your personal information is necessary for the Family Resolution Service (FRS) to provide you with services and to carry out the activities of Manitoba's Clare's Law Program. Your personal information is collected under the authority of clause 36(1)(b) of [The Freedom of Information and Protection of Privacy Act](#) of Manitoba ("FIPPA"), The Disclosure to Protect Against Intimate Partner Violence Act and the Disclosure to Protect Against Intimate Partner Violence Regulation. The FRS limits the personal information it collects about you to the minimum amount necessary for the purposes described above.

Your personal information is protected by FIPPA. The FRS cannot use or disclose your information for other purposes unless you consent or it is authorized to do so by FIPPA. The FRS and police maintain a duty to report information that a child or youth is or may be in need of protection under [The Child and Family Services Act](#) of Manitoba (the CFS Act).

Who do I contact if I have questions regarding collection, use, or disclosure of personal information?

If you have any questions about the FRS's collection, use, or disclosure of your personal information, please contact the Director of Family Safety and Wellbeing at ClaresLaw@gov.mb.ca or 431-335-1959.

8. Acknowledgement and Statement of Understanding

Please read the following information carefully. If you need help completing this form, you can call 431-335-1959 to speak with a Clare's Law Intake Coordinator.

- I have read and understand the information provided in this application.
- The information I have given in this application is, to the best of my knowledge, truthful, complete, and correct.
- I understand that any false statements may result in the discontinuation of the application process.
- I understand that if the FRS cannot verify identity or determine eligibility, the application process may continue, however, the Person at Risk/Representative will not be eligible to receive a disclosure under Clare's Law.
- I understand that FRS can decide to discontinue an application.
- I understand that if FRS discontinues my application, that does not mean there is no risk to me.
- I understand that the information I have provided is protected under provincial privacy legislation.
 - *Note: You may have rights to access or correct your information under this legislation.*

Before providing disclosure information, the Director and FRS must be satisfied that a recipient of the information understands and agrees to comply with the confidentiality obligations under [The Disclosure to Protect Against Intimate Partner Violence Act](#).

By checking the boxes below, you are agreeing that:

- I understand that any disclosure I may receive is confidential. I understand that I am required to keep any information disclosed confidential unless another law permits its disclosure.
- I understand that the FRS will only disclose confidential information to me verbally and not in any written or electronic formats. I agree not to take notes during the disclosure meeting, and I agree not to record the disclosure meeting.
- I agree not to share any disclosed information with others except any person approved by section 7(2) of the Act, including any support person present with me at the time the disclosure meeting, or any representative who applied on my behalf, or any person approved by section 13(1) of the Regulation. Sharing disclosed information includes sharing the information on social

media, using the information in any legal proceedings, and publishing, broadcasting, or sending information that could identify a specific person.

I understand that the information provided through disclosure is confidential and must only be used to safeguard myself.

(A) Person at Risk Signature (FILL OUT IF YOU ARE APPLYING FOR YOURSELF)

By checking this box, I, _____ (Full name) acknowledge that I have read and consent to the confidentiality obligations above.

Date

(B) Representative Signature (ONLY FILL OUT IF YOU ARE APPLYING ON BEHALF OF SOMEONE)

By checking this box, I, _____ (Full name of Representative) on behalf of _____ (Person at Risk's full name), acknowledge that I have both read and consent to the confidentiality obligations above.

Date

How to submit your application form:

By email: ClaresLaw@gov.mb.ca

In-person or by mail: 200-379 Broadway (2nd floor)
Winnipeg, MB R3C 0T9